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CONFIRMATION NO. 9723

<b>SERIAL NUMBER</b> 10/728,499	<b>FILING OR 371(c) DATE</b> 12/05/2003 <b>RULE</b>	<b>CLASS</b> 436	<b>GROUP ART UNIT</b> 1641	<b>ATTORNEY DOCKET NO.</b> 67169-5004
<b>APPLICANTS</b> Norberto A. Guzman, East Brunswick, NJ;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/821,328 06/17/2002 PAT 7,153,407 which is a CON of 09/436,186 11/08/1999 PAT 6,406,604 This application 10/728,499 claims benefit of 60/518,186 11/07/2003				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 08/13/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature <u>                    </u> Initials		<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 34	<b>TOTAL CLAIMS</b> 321
<b>INDEPENDENT CLAIMS</b> 17				
<b>ADDRESS</b> 24574				
<b>TITLE</b> ELECTROPHORESIS APPARATUS HAVING STAGGERED PASSAGE CONFIGURATION				
<b>FILING FEE RECEIVED</b> 3996	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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